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Texas House Committee on Human Services
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Dear Chairman Frank,

Thank you for the opportunity to comment on the Request for Information Topic ***Health Care Access and Medicaid*** on behalf of Nurse-Family Partnership (NFP).

NFP has been – and continues to be – grateful for the opportunity to partner with Texas since 2006 as a public health nursing benefit designed to improve outcomes for first-time, high risk pregnant women.

About Nurse-Family Partnership

Nurse-Family Partnership has over 40 years of evidence showing reduced maternal and child mortality through healthier pregnancies and birth outcomes and demonstrating significant downstream cost savings to Medicaid (see attached document on return on investment in Texas).

NFP pairs nurses with first-time mothers who are low-income (Medicaid-eligible) from as early in pregnancy as possible until their babies are two years old to help moms set goals to improve their health, their children's health, and their families' economic self-sufficiency. Traditionally, nurses visit with the mothers one-on-one in their homes for an hour on average approximately every other week. During the home visits, highly skilled and specially trained public health nurses assess mothers' health and their children's health and screen for health, mental health, substance use, domestic violence, and developmental milestones. Nurses also refer mothers to healthcare providers, social services, education, and employment resources and help mothers identify supports among and their networks of family, friends, and the community to reach their hearts' desires. At each visit, nurses work with moms to set small achievable goals from one visit to the next to help moms and their babies thrive physically and mentally, finish their education and find work.

Since 2006, Nurse-Family Partnership has served 14,964 mothers across Texas. Some of our outcomes include

- 89% of babies are born full term
- 89% of mothers initiated breastfeeding
- 95% of babies received all immunizations by 24 months
- 59% of clients age 18 and older were employed by the time their child was 24 months old

Nurse-Family Partnership Leads the Way with Telehealth During COVID-19 Pandemic

As public health nurses, Nurse-Family Partnership home visitors are undeterred by challenging circumstances whether hurricanes or pandemics. The Nurse-Family Partnership model has effectively integrated telehealth and alternate visit schedules as part of implementation since 2017. Drawing upon our success after Hurricane Harvey where we reached hundreds of mothers to assess their needs and delivered basic needs to moms before disaster relief organizations in many cases, Nurse-Family Partnership jumped into action to keep serving clients during the COVID-19 pandemic.

Pregnant and new moms are craving the credible information and support that NFP nurses provide and moms of toddlers are clamoring for ideas on how to keep their little ones safe and healthy at this time. Even though our nurses can't visit with moms in their homes, they have continued to deliver services via telehealth and alternate visit schedules, including enrollment and pre-natal visits. The NFP National Service Office is providing enhanced guidance and tools for our nurses and agencies, particularly related to mental health, intimate partner violence (IPV), substance use disorder, among other assessments, services, and supports. Through telehealth, Nurse-Family Partnership in Texas had its highest point in time enrollment ever on March 31st with 3,354 mothers enrolled.

NFP even partnered with Verizon during the first months of the pandemic to initiate a program called Phones to Families. This program provided 380 smart phones to families across Texas who needed them to complete telehealth encounters.

Continued Investment

Now more than ever, we need continued investment in Nurse-Family Partnership. For over a decade, the Texas Legislature has recognized the benefits of Nurse-Family Partnership including its outcomes and the return on investment. Every \$1 invested in Nurse-Family Partnership yields up to \$5.70 in savings on government spending. Our nurses are an integral part of the public health landscape for mothers and children in Texas. There are an estimated 38,294 first time births to mothers who are receiving Medicaid across the state who could benefit from Nurse-Family Partnership services, but with limited resources, we currently only reach a fraction of these mothers. That number will only grow as more families fall into poverty due to the economic impact of COVID-19.

We fully recognize that Texas is struggling to fund all public services in the wake of the COVID-19 crisis. However, now is the time to continue to build the critical public health nursing infrastructure that our state needs to prepare, prevent, intervene, offer relief, and lead recovery efforts when crises like COVID-19 occur. Moreover, Texas continues to lead the nation with the highest rates of maternal morbidity and mortality and infant mortality that are even more stark when disaggregated by race, ethnicity, and rural communities. At a time when hospitals and health systems are pulling out of more communities in Texas, we need more public health access, not less.

The Legislature should invest more heavily in public health programs like NFP than ever before so that we can provide quality access to care for mothers and babies covered by Medicaid across the state.

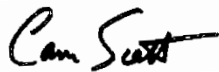
NFP and Medicaid

Texas could expand NFP services by leveraging federal Medicaid dollars for the implementation of NFP and coordinating referral processes from state agencies, MCOs, and other providers to deliver NFP to the most vulnerable moms and babies no matter where they live in Texas.

NFP's proven approach aligns with Medicaid's maternal and child health improvement and cost reduction goals. As NFP nurses use their skill and expertise to detect early warning signs of health problems during pregnancy, post-partum, infancy, and early childhood that can lead to adverse outcomes, they enable significant improvements in families' health and their lives as a whole, which also generates cost savings for the state by preventing unnecessary downstream Medicaid expenditures.

As part of Texas' current health care services structure, NFP is committed to supporting the strongest, most cost-effective approach to serving more Medicaid-eligible moms and their families at a critical time in their lives. We stand ready to support the development of a tailored approach to Medicaid reimbursement of NFP services in Texas.

Sincerely,



Cam Scott
Senior Government Affairs Manager

